PTO/SB/01 (10-00)

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DECLARATION — Utility or Design Patent Application

Direct all corresp	oondence to:	_		Number de Label			OR	⊠c	correspondence address below	
Name	Herbert Burka	ırd								
Address	480 Oakmead	l Parkway								
Address										
City						State		ZIP		
Sunnyvale						California		9408	35	
Country			Telep	hone					Fax	
U.S.A.			(408) 9	62-3920				(408) 962-3203	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.										
NAME OF SOLE OR FIRST INVENTOR: A petition has been filed for this unsigned inventor										
Given Name Family Name KOULIKOV or Surname										
SERGUEI OF Sumanie										
Inventor's Signature	1 1/1/03/70/9/									
Residence: Ch			Sta	te		Country			itizenship	
Los Altos			CA			USA		R	RUSSIAN	
Mailing Addres	s 455	Lassen S	St. Apt.	#2						
Mailing Addres	s			· · · · · · · · · · · · · · · · · · ·						
City	-	State			ZIP	P Country				
Los Altos		CA		:	940	4022 USA				
NAME OF SEC	OND INVEN	ror:	-			A petition has bee	en filed for	this	unsigned inventor	
Given Name	GIACOM	0				Family Name VAC or Surname	CCA			
Inventor's Signature	6	سنعض	منئث	Ruir	_	Date 2/2/	2004			
Residence: City	1			State		Country			Citizenship	
Santa Clars CA USA									ITALIAN	
Mailing Address 3508 Shafer Drive										
<u> </u>	Mailing Address									
City		State				ZIP		Co	ountry	
Santa Clara		CA				95051		Us	SA	
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DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet Page <u>1</u> of <u>2</u>

Name of Additional Joint Invento	or, if any:		☐ A petition has been f	iled for	this unsigned inventor				
Given Name (first and middle [if any])		_ Fa	amily Name or Surname						
ALEXANDER			ACHANOV						
Inventor's Signature					Date 02/02/04				
Residence: City Sunnyvale	State CA		Country		Russian Citizenship				
Mailing Address 1273Lakeside Driv	re Apt. # 1163		·						
Mailing Address									
City Sunnyvale	CA State	94085 ZIP	Count	USA try					
Name of Additional Joint Invent	or, if any:		☐ A petition has been f	iled for	this unsigned inventor				
Given Name (first and middle [if any])		F	amily Name or Surname						
BRUCE		R	ICHMAN						
Inventor's Signature W	'n				Date 2/2/04				
Residence: City Sunnyvale	CA State		USA Country		US Citizenship				
Mailing Address 955 Azure St. Apt.	#4								
Mailing Address									
City Sunnyvale	CA State		94087 ZIP	Count	USA try				
Name of Additional Joint Invent	or, if any:		☐ A petition has been to	filed for	this unsigned inventor				
Given Name (first and middle [if any])		F	amily Name or Surname						
BORIS		k	HARLAMOV						
Inventor's Signature	>				Date 02/02/09				
Residence: City Sunnyvale	CA State		USA		RUSSIAN Citizenship				
Mailing Address 655 South Fair Oa	kes Ave. Apt. # F-206								
Mailing Address									
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DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet Page 2of 2

Name of Additional Joint Invent	or, if any:		A petition has been	filed fo	or this unsigned inventor			
Given Name (first and middle [if any])		Ti	Family Name or Surname					
GUIDO			KNIPPELS					
Inventor's Signature					Date 2/2/64			
Residence City Sunnyvale	CA State		Country		Netherlands Citizenship			
Mailing Address 751 Winstead Terr	ace							
Mailing Address								
City Sunnyvale	State CA		94087 ZIP	Cou	USA ntry			
Name of Additional Joint Invent	or, if any:		☐ A petition has been	filed f	or this unsigned inventor			
Given Name (first and middle [if any])			Family Name or Surname					
CHRISTOPHER			RELLA .					
Inventor's Signature					Date 2 FEB 04			
Residence: City Sunnyvale	CA State		Country		US Citizenship			
Mailing Address 1015 Mango Ave.	·			·-·-				
Mailing Address								
City Sunnyvale	CA State		ZIP 94087 USA Country					
Name of Additional Joint Invent	or, if any:		☐ A petition has been	filed f	or this unsigned inventor			
Given Name (first and middle [if any])			Family Name or Surname					
НОА			PHAM					
Inventor's Signature Plan Date Feb 2								
Residence: City Mountain View	CA State		USA Country		US Citizenship			
Mailing Address 500 W. Middlefield	Road , #17	!						
Mailing Address								
City Mountain View	CA State	•	94043 ZIP	Cou	USA Country			

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Application Number

Filing Date

KOULIKO	First Named Inventor			SERGUEI KOULIKOV			
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		Attorney Do	cket N	lumber	PIC-10024	4	
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☐ Practitioners at Cu	stomer Number					Bar Code	
OR ⊠ Practitioner(s) nam	ned below:		Label here			re	
M Practitioner(s) man	Name		Registration Number				
·	Herbert Burkard		 	· · · · · · · · · · · · · · · · · · ·	24,500		
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as my/our attorney(s) o Trademark Office conn	or agent(s) to prosecute the nected therewith.	e application ide	entified	d above, and	to transact a	II business in t	he Patent and
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	ned Customer Number.	110 40012 122		*P ***********************************			ļ
OR				 		·	
Firm <i>or</i> Individual Name	Herbert Burkard, Reg. No	o. 24,500					
Address	Picarro, Inc.						
Address	480 Oakmead Parkway						
City	Sunnyvale	St	tate	California	ZIP	94085	
Country	U.S.A.						
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I am the:							
	or.						
Assignee of reco	ord of the entire interest. S	See 37 CFR 3.7	1.				
1 – •	37 CFR 3.73(b) is enclose						
	SIGNATUR	RE of Applicant	t or As	signee of Re	ecord		
Name Serguei	Koulikov				· · -		
Signature							
Date	02/02/04						
NOTE: Signatures of a	all the inventors or assign	ees of record of	of the	entire interes	st or their re	presentative(s	are required.

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★ Total of 3 forms are submitted.

SERGUEI KOULIKOV

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Application Number

Filing Date

KΩ	ULIKO	V. ET AL.		First Nam	ned Inv	entor	SERGUE	IKOULIKO	V		
	MODERNOV, ET AL.		Group Art	t Unit		N/A					
				Examiner	Name		N/A				
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Country		U.S.A.			,						
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Name	Giacomo	Vacca					-				
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NOTE: Signa	tures of a	Il the inventors	or assign	ees of recor	d of the	entire inter	est or their re	epresentativ	e(s) a	are requ	ired.
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Bruce Richman

2/2/04

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Application Number

		Filing Date		Herew	ith			
KOULIKO	KOULIKOV, ET AL.		Inventor	SERG	UEI	KOULIKOV		
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		Examiner Na	me	N/A				
		Attorney Doo	ket Numbe	r PIC-10	0024	1		
I hereby appoint: ☐ Practitioners at Cu OR	ustomer Number				ber	istomer Bar Code re		
				egistration Nun				
	Name							
	Herbert Burkard			24,500				
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Firm or	Herbert Burkard, Reg. N	o. 24,500						
Address	Picarro, Inc.							
Address	480 Oakmead Parkway							
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Country	U.S.A.							
Telephone	(408) 962-3920	F	ax (408)	962-3203				
	ord of the entire interest. So							
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NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required.

Herewith

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Application Number

Filing Date

KΩ	HIKO	V FT AI		First Nam	ed Inve	entor	SERGUE	I KOULIKO)V	
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				Examiner	Name		N/A			
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Firm or Individual	Name	Herbert Burkard	, Reg. N	o. 24,500						
Address		Picarro, Inc.								
Address		480 Oakmead F	arkway		_					
City		Sunnyvale			State	California	ZIP	94085		
Country		U.S.A.								
Telephone		(408) 962-3920			Fax	(408) 962-	3203			
I am the:										
	nt/Invento	or.								
☐ Assigne	ee of reco	ord of the entire in	terest. S	See 37 CFR 3	3.71.					
		37 CFR 3.73(b) is).				
		SI	GNATUF	RE of Applica	ant or A	ssignee of l	Record			
Name	Alexand	er Kachanov								
Signature	·	thus-								
Date				104	· - · - · · · ·					
NOTE: Signat	tures of a	all the inventors of	r assigr	nees of recor	d of the	entire inter	est or their re	epresentativ	ve(s) are requi	red.
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SERGUEI KOULIKOV

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Application Number

First Named Inventor

Filing Date

Group Art Unit Examiner Name N/A	KOULIKOV, ET AL.			First Nam	ed Inv	entor	SERGUEI KUULIKUV			
Attorney Docket Number Attorney Docket Number Attorney Docket Number Place Customer Number Bar Code Label Nere Practitioner(s) named below: Name Registration Number Herbert Burkard 24,500 as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the Patent and Trademark Office connected therewith. Please change the correspondence address for the above-identified application to: The above-mentioned Customer Number. OR Firm or Individual Name Address Picarro, Inc. Address Picarro, Inc. Address 480 Oakmead Parkway City Sunnyvale City Sunnyvale Country U.S.A. Telephone (408) 962-3920 Fax (408) 962-3203 I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Certificate under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). SIGNATURE of Applicant or Assignee of Record Name Boris Khartamov Signature Date	,,,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Group Art	Unit_		N/A			
I hereby appoint: Practitioners at Customer Number Place Customer Number Bar Code Label here		•		Examiner i	Name		N/A			
I hereby appoint: Practitioners at Customer Number				Attorney D	ocket I	Number	PIC-10024			
Practitioners at Customer Number OR Name Name Registration Number Bar Code Label here Name Name Registration Number Herbert Burkard 24,500 as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the Patent and Trademark Office connected therewith. Please change the correspondence address for the above-identified application to: The above-mentioned Customer Number. OR Firm or Individual Name Herbert Burkard, Reg. No. 24,500 Address Picarro, Inc. Address 480 Oakmead Parkway City Sunnyvale State California ZIP 94085 Country U.S.A. Telephone (408) 962-3920 Fax (408) 962-3203 I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Certificate under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). SIGNATURE of Applicant or Assignee of Record Name Boris Kharlamov Signature Date										
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Name Registration Number Herbert Burkard 24,500 as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the Patent and Trademark Office connected therewith. Please change the correspondence address for the above-identified application to: ☐ The above-mentioned Customer Number. OR ☐ Firm or Individual Name Address Picarro, Inc. Address 480 Oakmead Parkway City Sunnyvale State California ZIP 94085 Country U.S.A. Telephone (408) 962-3920 Fax (408) 962-3203 I am the: ☐ Applicant/Inventor. ☐ Assignee of record of the entire interest. See 37 CFR 3.71. Certificate under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). SIGNATURE of Applicant or Assignee of Record Name Boris Kharlamov Signature Date OR DE ORD TO SIGNATURE of Applicant or Assignee of Record		ners at Cu	stomer Number		-			de		
Name Registration Number Herbert Burkard 24,500 as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the Patent and Trademark Office connected therewith. Please change the correspondence address for the above-identified application to: The above-mentioned Customer Number. OR Herbert Burkard, Reg. No. 24,500 Individual Name Address Picarro, Inc. Address Picarro, Inc. Address Sunnyvale State California ZIP 94085 Country U.S.A. Telephone (408) 962-3920 Fax (408) 962-3203 I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Certificate under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). SIGNATURE of Applicant or Assignee of Record Name Boris Kharlamov Signature Date OR DR OFFICE ADDRESS AND SALE STATE SALE STATE SIGNATURE of Applicant or Assignee of Record		ner(s) nam	ned below:				Zaber Nere			
as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the Patent and Trademark Office connected therewith. Please change the correspondence address for the above-identified application to: The above-mentioned Customer Number. OR Firm or Individual Name Herbert Burkard, Reg. No. 24,500						Regist	ation Number			
Trademark Office connected therewith. Please change the correspondence address for the above-identified application to: The above-mentioned Customer Number. OR Firm or Individual Name Address Picarro, Inc. Address Picarro, Inc. Address Sunnyvale State California ZIP 94085 Country U.S.A. Telephone (408) 962-3920 Fax (408) 962-3203 I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Certificate under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). SIGNATURE of Applicant or Assignee of Record Name Boris Kharlamov Signature Date 02 02 04			Herbert Burkard		24,500					
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Herbert Burkard, Reg. No. 24,500 Address Picarro, Inc. Address 480 Oakmead Parkway City Sunnyvale State California ZIP 94085 Country U.S.A. Telephone (408) 962-3920 Fax (408) 962-3203 I am the:	l					• •				
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Address 480 Oakmead Parkway City Sunnyvale State California ZIP 94085 Country U.S.A. Telephone (408) 962-3920 Fax (408) 962-3203 I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Certificate under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). SIGNATURE of Applicant or Assignee of Record Name Boris Kharlamov Signature Date 02/02/04		I Name	Herbert Burkard, Reg. 1	No. 24,500						
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Address		Picarro, Inc.	· ·				····				
Address		480 Oakmead Parkway		I	1						
City		Sunnyvale		State	California	ZIP	94085				
Country		U.S.A.		··r -							
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First Named Inventor

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Address		480 Oakmead Parkway						
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Address		Picarro, Inc.									
Address	***************************************	480 Oakmead Parkway		***		1	•				
City		Sunnyvale		State	California	ZIP	94085				
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